		(Column 1)		. (Column 2)	(Column 3)
AMENDMENTC		CLAIMS REMAINING AFTER, AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		-
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

. If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

+180-+360= OB TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," OR "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, error "3," ADDIT, FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column. 1.

FORM PTO-875 (Rev. 10/04)

Patient and Trademark Office, U.S. DEPARTUENT OF COMMERCI

RATE TIONAL

X\$ 25=

X100=

FEE

ADDI-

TIONAL

FEE

RATE

X\$50= OR

X200= OR